

\*\*\* APPLICATION INFORMATION DISPLAY \*\*\*

	DETAIL	CONTENTS:
	INFORMATION:	
SC/SN:	09/444541	06 DOCK D 02/23/00
FILDT:	11/22/99	05 TR.Q E 01/19/00
PATNO:	PUBNO:	04 OIPE I 01/04/00
ISSDT:	PUBDT: 00/00/00	03 SCAN E 12/23/99
ABNDT:	PGPUB CL/SC: /	02 ZZZZ L 12/13/99
APPL:	GAGON	01 IEXX E 11/30/99
LOC:	2747 LOC DT: 02/23/00 BATNO:	8405
CHG-LOC:	IE TEAM: 00 ISSNO: 00	/ /
CHGTO-NAME:	NO NAME FOUND	/ /
TOT ACT:	00 STATUS: 030 STADT: 02/23/00	/ /
RESP CD:	START DT: / / DUE DT: / /	/ /
EXMR NO/NAME:	70371/HARVEY, MINSUN O	/ /
DOCKET DATE:	02/23/00 GAU: 2747 L R CD: 01	/ /
ATTY DOCK #:	BBE1199CIP LOST N LOST DT 00/00/00	/ /
APPLN TYPE:	1 TYPE SM ENT: 2 UNMAT PET: N	/ /
CURR CL/SC:	381/098.000 FOR PRIOR CL: N PET FAOM:	/ /
TITLE OF INVENTION:	UNAVAIL FOR ACTION: N PP UNAVAIL: 0	/ /
AUDIO BOOST CIRCUIT		OK IN SEARCH SOL

END OF DISPLAY

TO DISPLAY CONTENTS: PUSH SEND

SERIAL NUMBER 09/444,541	FILING DATE 11/22/99	CLASS 330	GROUP ART UNIT 2817	ATTORNEY DOCKET NO. BBE1199CIP
-----------------------------	-------------------------	--------------	------------------------	-----------------------------------

APPLICANT

PAUL R. GAGON, HUNTINGTON BEACH, CA.

## \*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED THIS APPLN IS A CIP OF 09/439,119 11/12/99

## \*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

## \*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/30/99 \*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS

FOLEY & LARDNER  
 3000 K STREET NW SUITE 500  
 P O BOX 25696  
 WASHINGTON DC 20007-8696

TITLE

AUDIO BOOST CIRCUIT

FILING FEE RECEIVED \$380	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------	---	---